U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

OIVID INU. 1000-0006	
Expiration Date: July 31, 2	2015

		SECTION A - PROPE	RTY INFORM	MATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name GULFSIDE ASSOC.,INC.			Policy Number:		
A2. Building Street Address (in 950 S. BEACH BLVD (OPEN A		nd/or Bldg. No.) or P.O. F	Route and Box N	lo.	Company NAIC Number:
City Waveland		State MS	ZIP Code 3	39576	The Court of the Court of the Court
A3. Property Description (Lot a TAX PARCEL # (165B-0-15-045		rcel Number, Legal Desc	cription, etc.)	N - Milay	
 A4. Building Use (e.g., Residen A5. Latitude/Longitude: Lat. N 3 A6. Attach at least 2 photograph A7. Building Diagram Number A8. For a building with a crawls a) Square footage of crawl b) Number of permanent floor enclosure(s) within 1. c) Total net area of flood of d) Engineered flood openir 	30-15-57 Long. W 89-23-ns of the building if the Cer 1 pace or enclosure(s): space or enclosure(s) bood openings in the crawls 0 foot above adjacent grad penings in A8.b gs?	34 tificate is being used to c NA sq ft pace le NA NA sq in	A9. For a t a) Sq b) Nu wit c) To d) En	rance. building with an att puare footage of att imber of permaner thin 1.0 foot above tal net area of floor igineered flood ope	tached garage <u>NA</u> sq ft of flood openings in the attached garage adjacent grade <u>NA</u> d openings in A9.b <u>NA</u> sq in enings? □ Yes ☒ No
A Company of the Comp	SECTION B - FLC	OOD INSURANCE RA	TE MAP (FIR	M) INFORMATION	ON
B1. NFIP Community Name & Co Waveland 285262	ommunity Number	B2. County Name Hancock	*		B3. State MS
B4. Map/Panel Number B 28045C-0344	5. Suffix B6. FIRM Inc D 10-16-0	09 Effective/F	RM Panel Revised Date 16-09	B8. Flood Zone(s) VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
C1. Building elevations are based *A new Elevation Certificate w C2. Elevations – Zones A1–A30, below according to the buildin Benchmark Utilized: LOCAL	vill be required when constr AE, AH, A (with BFE), VE,	n Drawings* □ ruction of the building is o V1–V30, V (with BFE), A n A7. In Puerto Rico only	Building Under complete. R, AR/A, AR/AB , enter meters.	Construction*	RED) ☐ Finished Construction /AH, AR/AO. Complete Items C2.a-h
Indicate elevation datum used	I for the elevations in items	Vertical Datum: <u>I</u> a) through h) below. □		NAVD 1988 □ (Other/Source:
Datum used for building eleva	tions must be the same as	that used for the BFE.			k the measurement used.
 a) Top of bottom floor (including) b) Top of the next higher floor c) Bottom of the lowest horizon d) Attached garage (top of slate) e) Lowest elevation of maching (Describe type of equipment) f) Lowest adjacent (finished) 	ntal structural member (V z b) ery or equipment servicing it and location in Comment	Zones only) the building s)	10.5 NA NA NA NA		Seet
g) Highest adjacent (finished)	grade next to building (HA	G)	10.4		☐ feet ☐ meters
h) Lowest adjacent grade at lo	west elevation of deck or s	tairs, including structural	support <u>NA</u>		☐ feet ☐ meters
	SECTION D - SURVE	YOR, ENGINEER, O	R ARCHITEC	T CERTIFICATION	NO
This certification is to be signed a information. I certify that the inform I understand that any false staten Check here if comments are Check here if attachments. Certifier's Name Duke Levy	mation on this Certificate re nent may be punishable by provided on back of form.	presents my best efforts fine or imprisonment und Were latitude and lo licensed land surve	to interpret the der 18 U.S. Cod ingitude in Secti	data available. le, Section 1001. ion A provided by a	WE LEV
Title Surveyor	Company Nam				
Address 314-Coleman Ave	City Waveland			Code 39576	TAN SURVEY SO
Signature	Date 1-28-15	Tele	phone 228-46	3-0130	W UF MID

IIIII OITITATI III III III OOO OP	aces, copy the corresponding info	ormation from Section A.	FOR INSURANCE COMPANY USE
	ding Apt., Unit, Suite, and/or Bldg. No.) or		Policy Number:
City Waveland	S. (0.1.2.2)	State MS ZIP Code 39576	Company NAIC Number:
SE	CTION D - SURVEYOR, ENGINEE	R, OR ARCHITECT CERTIFIC	CATION (CONTINUED)
Copy both sides of this Elevation	on Certificate for (1) community official, (2) insurance agent/company, and	(3) building owner.
Comments PROJECT # 1001 BM -ORANGE PAINT SPOT O	1260 DN TOP CENTER OF A SEWER MAN H	OLE COVER AT PROP AT EL =	
Signature		Date 1-28-15	3 Company of Standard Company of Company of the
A July	A THE WATER		Frank Barbara State
SECTION E - BUILDING	G ELEVATION INFORMATION (SU	RVEY NOT REQUIRED) FOR	R ZONE AO AND ZONE A (WITHOUT BFE)
grade (HAG) and the low a) Top of bottom floor (inc b) Top of bottom floor (inc E2. For Building Diagrams 6- (elevation C2.b in the dia E3. Attached garage (top of s E4. Top of platform of machin E5. Zone AO only: If no flood	vest adjacent grade (LAG). cluding basement, crawlspace, or enclos cluding basement, crawlspace, or enclos cluding basement, crawlspace, or enclos -9 with permanent flood openings provide grams) of the building is	ture) is feet cure) is feet ed in Section A Items 8 and/or 9 (so feet meters above or below the ling is feet the bottom floor elevated in accordance.	e HAG. meters □ above or □ below the HAG. dance with the community's floodplain management
	No Unknown. The local official must		Control of the Contro
	CTION F - PROPERTY OWNER (O		
The property owner or owner's	authorized representative who completes	s Sections A, B, and E for Zone A	(without a FEMA-issued or community-issued BFE)
or Zone AO must sign here. The	e statements in Sections A. B. and F. are	correct to the best of my knowled	de.
	uthorized Representative's Name	correct to the best of my knowled	ge.
Property Owner's or Owner's Ar		City	ge. State ZIP Code
Property Owner's or Owner's Ar Address			
Property Owner's or Owner's Al Address Signature		City	State ZIP Code
Property Owner's or Owner's Al Address Signature		City	State ZIP Code Telephone
Property Owner's or Owner's Al Address Signature	uthorized Representative's Name	City Date	State ZIP Code Telephone Check here if attachmen
Address Signature Comments he local official who is authorized	uthorized Representative's Name SECTION G – COMMU	City Date INITY INFORMATION (OPTIOn munity's floodplain management	State ZIP Code Telephone Check here if attachment DNAL) ordinance can complete Sections A, B, C (or E), and G
Property Owner's or Owner's Al Address Signature Comments he local official who is authorized fithis Elevation Certificate. Completed is authorized by law to 12. A community official co	SECTION G – COMMU I by law or ordinance to administer the conclete the applicable item(s) and sign below. Itom C was taken from other documentation certify elevation information. (Indicate the ampleted Section E for a building located	City Date INITY INFORMATION (OPTIOn munity's floodplain management and the control on that has been signed and sealed a source and date of the elevation in Zone A (without a FEMA-issued)	State ZIP Code Telephone Check here if attachment Check here if att
Property Owner's or Owner's Al Address Signature Comments he local official who is authorized fithis Elevation Certificate. Complete is authorized by law to 2. A community official co 3. The following information	SECTION G – COMMU I by law or ordinance to administer the con- elete the applicable item(s) and sign below. tion C was taken from other documentation certify elevation information. (Indicate the	City Date DNITY INFORMATION (OPTIC mounity's floodplain management used in contact the measurement used in on that has been signed and sealer source and date of the elevation in Zone A (without a FEMA-issued unity floodplain management purposes.)	State ZIP Code Telephone Check here if attachment Check here if att
Property Owner's or Owner's Al Address Signature Comments he local official who is authorized fithis Elevation Certificate. Complete is authorized by law to 2. A community official co 3. The following information G4. Permit Number	SECTION G – COMMU I by law or ordinance to administer the consider the applicable item(s) and sign below. Ition C was taken from other documentation certify elevation information. (Indicate the applicable item (s) and sign below. Ition C was taken from other documentation certify elevation information. (Indicate the application of the completed Section E for a building located on (Items G4–G10) is provided for committee G5. Date Permit Issued	Date INITY INFORMATION (OPTIOn munity's floodplain management and the source and date of the elevation in Zone A (without a FEMA-issued unity floodplain management purposes.	State ZIP Code Telephone Check here if attachment Check here if att
Address Signature Comments he local official who is authorized this Elevation Certificate. Compl. The information in Sect is authorized by law to is	SECTION G – COMMU If by law or ordinance to administer the conclete the applicable item(s) and sign below, tion C was taken from other documentation certify elevation information. (Indicate the ampleted Section E for a building located on (Items G4–G10) is provided for comm G5. Date Permit Issued If for: New Construction floor (including basement) of the building of flooding at the building site:	City Date Date Diviry Information (OPTIC munity's floodplain management used in on that has been signed and sealer source and date of the elevation in Zone A (without a FEMA-issued unity floodplain management purpose. G6. Date Certification in the control of the elevation in Zone A (without a FEMA-issued unity floodplain management purpose. G6. Date Certification in the control of the con	State ZIP Code Telephone Check here if attachment Check here if att
Address Signature Comments The local official who is authorized this Elevation Certificate. Complete is authorized by law to	SECTION G – COMMU If by law or ordinance to administer the conclete the applicable item(s) and sign below, tion C was taken from other documentation certify elevation information. (Indicate the ampleted Section E for a building located on (Items G4–G10) is provided for comm G5. Date Permit Issued If for: New Construction floor (including basement) of the building of flooding at the building site:	City Date Date Da	State ZIP Code Telephone Check here if attachment Check here if att
Property Owner's or Owner's Ale Address Signature Comments The local official who is authorized in this Elevation Certificate. Complete is authorized by law to is authorized	SECTION G – COMMU If by law or ordinance to administer the conclete the applicable item(s) and sign below, tion C was taken from other documentation certify elevation information. (Indicate the ampleted Section E for a building located on (Items G4–G10) is provided for comm G5. Date Permit Issued If for: New Construction floor (including basement) of the building of flooding at the building site:	City Date Date Da	State ZIP Code Telephone Check here if attachment Check here if att
Property Owner's or Owner's Ale Address Signature Comments he local official who is authorized of this Elevation Certificate. Complete is authorized by law to its authorized by law to it	SECTION G – COMMU If by law or ordinance to administer the conclete the applicable item(s) and sign below, tion C was taken from other documentation certify elevation information. (Indicate the ampleted Section E for a building located on (Items G4–G10) is provided for comm G5. Date Permit Issued If for: New Construction floor (including basement) of the building of flooding at the building site:	Date Date Date	State ZIP Code Telephone Check here if attachment Check here if att

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

	5	SECTION A - PROPER	TY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name GULFSIDE ASSOC.,INC.			Policy Number:	
A2. Building Street Addres 950 S. BEACH BLVD (OPE	s (including Apt., Unit, Suite, an N AIR CHAPEL)	d/or Bldg. No.) or P.O. Rou	ute and Box No.	Company NAIC Number:
City Waveland		State MS	ZIP Code 39576	A STATE COLOR TO THE STATE OF T
A3. Property Description (L TAX PARCEL # (165B-0-15	ot and Block Numbers, Tax Par -045.000)	cel Number, Legal Descrip	otion, etc.)	
 A5. Latitude/Longitude: Lat A6. Attach at least 2 photog A7. Building Diagram Numl A8. For a building with a cr a) Square footage of c b) Number of permane 	awlspace or enclosure(s): crawlspace or enclosure(s) cent flood openings in the crawlsp in 1.0 foot above adjacent grade od openings in A8.b oenings?	34 tificate is being used to obt NA sq ft pace e NA NA sq in	Horizontal D tain flood insurance. A9. For a building with an a) Square footage o b) Number of perma within 1.0 foot abo	of attached garage NA sq ft anent flood openings in the attached garage ove adjacent grade NA flood openings in A9.b NA sq in openings?
			= IVIAP (FIRIVI) INFORIVIA	
B1. NFIP Community Name Waveland 285262	& Community Number	B2. County Name Hancock	900 C. F. F. 10 10 10 10 10 10 10 10 10 10 10 10 10	B3. State MS
B4. Map/Panel Number 28045C-0344	B5. Suffix D B6. FIRM Ind 10-16-0		vised Date Zone(s)	
Designation Date: NA C1. Building elevations are by *A new Elevation Certification C2. Elevations – Zones A1–A	ased on: Construction ate will be required when construction 30, AE, AH, A (with BFE), VE, Vuilding diagram specified in Item	CBRS NG ELEVATION INFOR In Drawings* Uction of the building is cor V1–V30, V (with BFE), AR,	OPA RMATION (SURVEY REC Building Under Construction* mplete. , AR/A, AR/AE, AR/A1–A30, enter meters.	QUIRED)
Indicate elevation datum	used for the elevations in items	a) through h) below. \square N		Other/Source:
a) Top of bottom floor (ind b) Top of the next higher c) Bottom of the lowest he d) Attached garage (top of e) Lowest elevation of ma (Describe type of equip f) Lowest adjacent (finish g) Highest adjacent (finish	orizontal structural member (V Z of slab) achinery or equipment servicing ament and location in Comments ed) grade next to building (LAG ned) grade next to building (HAC at lowest elevation of deck or s	or enclosure floor) Zones only) the building s) 3) tairs, including structural s	10.5 NA. 24.5 NA. 25.8 9.9 10.4 upport NA.	check the measurement used. feet
			ARCHITECT CERTIFICA	
information. I certify that the is I understand that any false st	ed and sealed by a land surveyon formation on this Certificate reatement may be punishable by are provided on back of form. ts. Company Name	presents my best efforts to fine or imprisonment under Were latitude and long licensed land surveyo Licens	o interpret the data available. r 18 U.S. Code, Section 100 gitude in Section A provided	1. NELEVI
Address 314 Coleman Ave	City Waveland	State	MS ZIP Code 39576	
Signature	Date 7-14-15	Telep	hone 228-463-0130	S OF MIGS

Duilding Street Address /including	s, copy the corresponding information fr	om Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including A 950 S. BEACH BLVD (OPEN AIR C	Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route CHAPEL)	and Box No.	Policy Number:
City Waveland	State MS	ZIP Code 39576	Company NAIC Number:
SECTION	ON D – SURVEYOR, ENGINEER, OR ARC	CHITECT CERTIFICATION	N (CONTINUED)
Copy both sides of this Elevation C	ertificate for (1) community official, (2) insurance	agent/company, and (3) bui	lding owner.
Comments TBM -ORANGE PAIN BREAKER PANEL IS LOWEST ME	T SPOT ON TOP CENTER OF A SEWER MAN ECHANICLE AT EL = 25.8' FEET	HOLE COVER AT PROP A	T EL = 10.70' FEET
ignature	by a set of the Da	te 7-14-18	A CONTRACTOR OF THE STATE OF TH
SECTION E - BUILDING E	LEVATION INFORMATION (SURVEY NOT	REQUIRED) FOR ZON	E AO AND ZONE A (WITHOUT BFE)
and C. For Items E1–E4, use natural E1. Provide elevation information grade (HAG) and the lowest a a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6–9 with (elevation C2.b in the diagrams E3. Attached garage (top of slab) E4. Top of platform of machinery at E5. Zone AO only: If no flood depordinance? Yes No	ng basement, crawlspace, or enclosure) is	sed. In Puerto Rico only, enters to show whether the eleval feet mel feet mel feet mel feet meters above or below the HAG. feet meters or elevated in accordance vinformation in Section G. S REPRESENTATIVE) C. B, and E for Zone A (withous best of my knowledge.	er meters. tion is above or below the highest adjacent ters
			☐ Check here if attachments
	CECTION C. COMMUNITY INCO	RMATION (OPTIONAL)	
24 - 2	SECTION G - COMMUNITY INFO	MILLION (OF HOUSE)	
local official who is authorized by la	aw or ordinance to administer the community's floo	dplain management ordinand	se can complete Sections A, B, C (or E), and G
is Elevation Certificate. Complete the The information in Section C is authorized by law to certificate. A community official completed. The following information (Ite.)	aw or ordinance to administer the community's floone applicable item(s) and sign below. Check the mean was taken from other documentation that has be y elevation information. (Indicate the source and ted Section E for a building located in Zone A (with the source and lems G4–G10) is provided for community floodpla	dplain management ordinance easurement used in Items Green signed and sealed by a lidate of the elevation data in thout a FEMA-issued or comin management purposes.	8–G10. In Puerto Rico only, enter meters, icensed surveyor, engineer, or architect who the Comments area below.) Immunity-issued BFE) or Zone AO.
is Elevation Certificate. Complete the The information in Section C is authorized by law to certificate. A community official completed. The following information (Item)	wor ordinance to administer the community's floone applicable item(s) and sign below. Check the mode was taken from other documentation that has bey elevation information. (Indicate the source and ted Section E for a building located in Zone A (wi	dplain management ordinance easurement used in Items Green signed and sealed by a lidate of the elevation data in thout a FEMA-issued or comin management purposes.	8–G10. In Puerto Rico only, enter meters. icensed surveyor, engineer, or architect who the Comments area below.)
his Elevation Certificate. Complete the comp	aw or ordinance to administer the community's floor ne applicable item(s) and sign below. Check the me applicable item of the source and ted Section E for a building located in Zone A (witems G4–G10) is provided for community floodplated G5. Date Permit Issued New Construction	dplain management ordinance easurement used in Items Green signed and sealed by a lidate of the elevation data in thout a FEMA-issued or comin management purposes. G6. Date Certificate Of	8–G10. In Puerto Rico only, enter meters, icensed surveyor, engineer, or architect who the Comments area below.) Imunity-issued BFE) or Zone AO.
is Elevation Certificate. Complete the Importance of the information in Section Complete is authorized by law to certify A community official completed. The following information (Itself). The following information (Itself). Permit Number This permit has been issued for: Elevation of as-built lowest floor (Itself). Community's design flood elevation.	wor ordinance to administer the community's floor ne applicable item(s) and sign below. Check the me applicable item(s) and sign below. Check the me was taken from other documentation that has been yelevation information. (Indicate the source and ted Section E for a building located in Zone A (witems G4–G10) is provided for community floodplated G5. Date Permit Issued New Construction	dplain management ordinance easurement used in Items Green signed and sealed by a lidate of the elevation data in thout a FEMA-issued or comin management purposes. G6. Date Certificate Of mprovement feet meters feet meters	B–G10. In Puerto Rico only, enter meters, icensed surveyor, engineer, or architect who the Comments area below.) Inmunity-issued BFE) or Zone AO. Compliance/Occupancy Issued Datum Datum
is Elevation Certificate. Complete the Importance of the information in Section Complete is authorized by law to certify A community official completed. The following information (Itself). The following information (Itself). This permit has been issued for: Elevation of as-built lowest floor (Itself). Community's design flood elevation. Community's design flood elevation.	aw or ordinance to administer the community's floor ne applicable item(s) and sign below. Check the me was taken from other documentation that has be y elevation information. (Indicate the source and ted Section E for a building located in Zone A (witems G4–G10) is provided for community floodpla G5. Date Permit Issued New Construction	dplain management ordinance easurement used in Items Green signed and sealed by a light date of the elevation data in thout a FEMA-issued or comin management purposes. G6. Date Certificate Of mprovement feet meters feet meters feet meters	B–G10. In Puerto Rico only, enter meters. licensed surveyor, engineer, or architect who the Comments area below.) limunity-issued BFE) or Zone AO. Compliance/Occupancy Issued Datum Datum
his Elevation Certificate. Complete the line information in Section C is authorized by law to certify A community official completed. The following information (Ite. 4. Permit Number This permit has been issued for: Elevation of as-built lowest floor (BFE or (in Zone AO) depth of floor	aw or ordinance to administer the community's floor ne applicable item(s) and sign below. Check the me applicable item of the source and ted Section E for a building located in Zone A (witems G4–G10) is provided for community floodplated G5. Date Permit Issued New Construction	dplain management ordinance easurement used in Items Given signed and sealed by a lidate of the elevation data in thout a FEMA-issued or comin management purposes. G6. Date Certificate Of mprovement feet meters feet meters feet meters feet meters	B–G10. In Puerto Rico only, enter meters. icensed surveyor, engineer, or architect who the Comments area below.) imunity-issued BFE) or Zone AO. Compliance/Occupancy Issued Datum Datum

ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number:

950 N.BEACH BLVD
City Waveland

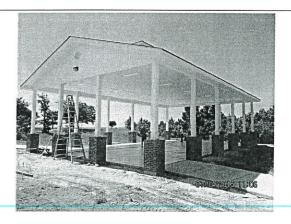
State MS

ZIP Code 39576

Company NAIC Number:

FOR INSURANCE COMPANY USE

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.





Note: The V-zone certificate is not a substitute for and cannot be used without the NFIP Elevation Certificate (see Fact Sheet No. 4), which is required for flood insurance rating.

VZONE	CERTIFICA	TT
V-ZOIND	CERTIFICA	\ I F

V-ZONE CERTIFICATE
Name GULFSIDE ASSOCIATION, INC Policy Number (Insurance Co. Use) Building Address or
Building Address or Other Description 950 S, BEACH BLVD (OPEN AIR CHAPEL) City WAVE LAND State MS Zip Code 39576
City WAVE LAND State MS Zip Code 39570
SECTION I: Flood Insurance Rate Map (FIRM) Information
Community Number 285262 Panel Number 0344 Suffix D Date of FIRM Index FIRM Zone VE
SECTION II: Elevation Information NOTE: This Certificate does not substitute for an Elevation Certificate
1. Elevation of the Bottom of Lowest Horizontal Structural Member. 10.5 feet (NGVD) 2. Base Flood Elevation (BFE). 24 feet (NGVD) 3. Elevation of Lowest Adjacent Grade. 10 feet (NGVD) 4. Approximate Depth of Anticipated Scour/Erosion used for Foundation Design. 0.5 feet (NGVD) 5. Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade. 4 feet (NGVD)
SECTION III: V-Zone Certification Statement NOTE: This section must be certified by a registered engineer or architect
I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used are in accordance with accepted standards of practice for meeting the following provisions: • The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE; and AT ELEVATION 24.5
• The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.
SECTION IV: Breakaway Wall Certification Statement NOTE: This section must be certified by a registered engineer or architect when breakaway walls exceed a design safe loading resistance of 20 pounds per square foot
I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used for the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions: • Breakaway wall collapse shall result from a water load less than that which would occur during the base flood; and • The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (wind and water loading values to be used are defined in Section III).
SECTION V: Certification
Signature below certifies: Section III; Section IV Certifier's Name DUKE LEVY Company Name DI GITAL ENGR. Title PROFESSIONAL ENGR, License Number 7448 Street Address 314 COLEMAN AVC.
City Wave Land, ms. State Zip Code 39576 Standture Date 2-2-15 Telephone Number 9691
Signature Date 2-2-15 Telephone Number 969

WAVELAND

2015 9293 Recorded in the Above Deed Book & Page 09-02-2015 04:31:02 PM

NONCONVERSION AGREEMEN Timothy A Kellar with

CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 2 day of Leptenber, 2015, by Mollie M. Stewart For: ———————————————————————————————————
("Owner") having an address at Gulfsive Association INC.
WITNESSETH:
WHEREAS, the Owner is the record owner of all that real property located at 950 5 Beach Blod in the City of Waveland, Ms. in the County of Hancock,
designated in the Tax Records as/65 /3 - 0 - 15 - 0 45,000
WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of
Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Number 325 and under Permit Number 17495
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the
following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
1. The structure or part thereof to which these conditions apply is:
2. At this site, the Base Flood Elevation is <u>23</u> feet above mean sea level, National Geodetic Vertical Datum.
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain
equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the
structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions: OPEN AIR ChaPEL
In witness whereof the undersigned set their hands and seals this 2 day of 2 thurs 2015.
Dulpside assaciation, enc.
Mollie M. Stoward (Seal) (Seal)
Owner C Witness

State of Mississippi County of Hancock

Personally appeared before me, the undersigned authority in and for the said county and state, on this 2 day of September , 20 /5 , within

my jurisdiction, the within named, Mollie M. Stewart For-Gulfsive Association Inc.

who acknowledged that <u>he</u> executed and delivered the above and foregoing instrument.

Timothy A. Kellar Chancery Clerk By: Leli Danie DC

My Commission Expires Dec. 31, 2015

9/02/2015 REAL PROPERTY APPRAISAL MASTER FILE INQUIRY 16:19:20 State ID: 165B-0-15-045.000 ACCOUNT # 1984 YEAR APPRAISED:
MAP PARCEL SCT QTR TWN RNG DEEDED CALCULATED DIST CODE LOC DST CODE 00 0 00 00 1450 0 22
Taxable: BEAT: 2 CITY: 2 SCHOOL: 1 SPECIAL: 0 Status:
OWNER NAME: GULFSIDE ASSN OF WAVELAND IN CARE OF: MAILING ADDR.: WAST UPDATED Date: 10/26/2007 BY: GWALTMAN
CITY/STATE/ZIP: Name:
Contact: Town: BRIEF DESCR: 3RD WARD WAVELAND LOT 153 B C & E 155 157 1 SUBDIVISION: BLOCK: LOT#: LOT SIZE:
ZONED: DATE BOOK PAGE DATE BOOK PAGE DATE BOOK PAGE
DEED INFO:1/0000 AA41 907
CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT SPL:
F4 - View Entire Legal F6 - Land Info F7 - Building Info F8 - Homestead F12 - Exit F15 - Print PRC F20 - View Images

2015 9295 Deed Book & Page



Hancock County
I certify this instrument was filed on
09-02-2015 04:31:02 PM
and recorded in Deed Book
2015 at pages 9293 - 9295
Timothy A Kellar
Shelia Daniels

Hancock County Chancery Clerk Instrument Recording Receipt

Book: Deed Inst: Agreement

Book/Page: 2015 / 9293

Ref: GULFSIDE ASSOCIATION 22259

Archiver Record Management	1.00
Deed	11.00
Recording Fee	0.00
Total Fees: \$	12.00
the use aim top our top the loss was not use and top and the son but more our top and the son has been son use and use	
Total Due : \$	12.00
Checks Paid: \$	12.00
Total Paid: \$	12.00
Change Due : \$	0.00

Have a Nice Day Timothy A Kellar

Term/Cashier: RM175-02-9MQQDQ / SHELIA

Tran: 10857.150301.181455 Printed: 09-02-2015 04:31:03 PM